

Form CPF M 102: Campaign Finance Report Municipal Form REGISTRAR OF VOTERS

Office of Campaign and Political Finance

2022 JAN 20 PM 2: 56

Fill in Reporting Period dates:	Pasiunius D.	File with: City or Town Clerk or Election Commission
and the potenting i error dates.	Beginning Date:	0/16/21 Ending Date: 12/31/21
Type of Report: (Check one)		
8th day preceding preliminary	8th day preceding election	☐ 30 day after election 🔀 year-end report ☐ dissolution
LouiscL	oura	01-101-1
Candidate Full Name (if		Cinte to Elect Louis Leura
Taunton Sch	cool Conta	Markon Charles
Office Sought and I	F Transford In	Name of Committee Treasurer
Residential Addi	00000	Committee Mailing Address
E-mail: Louis Loura e	gmail.com	E-mail: chase marion 9 egmail. con
Phone # (optional): 508 - 6	558-9385	Phone # (optional): 578-345-0760
	SUMMARY BALANC	CE INFORMATION:
Line 1: Ending Balance	ce from previous report	# 2519,00
Line 2: Total receipts	this period (page 3, line 11)	800,00
Line 3: Subtotal (line		3319,00
	tures this period (page 5, lin	ne 14) 225, 50
Line 5: Ending Balance	e (line 3 minus line 4)	3094.00
	contributions this period (pa	uge 6)
	tanding liabilities (page 7)	3500.00
Line 8: Name of bank(s) used: Mechani	is Cooperative Bank
inance activity of all persons acting under the author Signed under the penalties of perjury:	ity or on behalf of this committee in a	(Treasurer's signature) Date: 1/20/23
FOR CANDIDATE FILINGS ONLY: A	Affidavit of Candidate: (check 1 box	x only)
I certify that I have examined this report including activity, of all persons acting under the authority incurred any liabilities nor made any expenditure.	ng attached schedules and it is, to the l	best of my knowledge and belief, a true and complete statement of all campaign finance cordance with the requirements of M.G.L. c. 55. I have not received any contributions, period that are not otherwise disclosed in this report.
Candidate without Committee I certify that I have examined this report including finance activity, including contributions loans re	ng attached schedules and it is, to the becoints expenditures dishure	best of my knowledge and belief, a true and complete statement of all campaign in-kind contributions and liabilities for this reporting period and represents the candidate in accordance with the requirements of M.G.L. c. 55.
igned under the penalties of perjury:	Louis C	Joure (Candidate's signature) Date: 1/20/22

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

Date Received	Name and Residential Address (alphabetical listing required) Amount		Occupation & Employer (for contributions of \$200 or more)	
	1			
			251	
			158/	
ne 9: Total Receipt	ts over \$50 (or listed above)			
ne 10: Total Receip	ots \$50 and under* (not listed above)			
ne 11: TOTAL RI	ECEIPTS IN THE PERIOD	←	Enter on page 1, line 2	

^{*} If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required) Amount		Occupation & Employer (for contributions of \$200 or more)
18/20	CTE Joe C. Ferraira	100.00	
10/27	CTE Marc J. Santos	100-00	
10/29	Horris Wallecka	150.00	Retired
10/29	Outones Caramelo	50.02	Retired
12/2	Robert F White	201-02	Retired
1215	Notor Convers Easton, MA	200.00	Retered
ine 9: Total Recei	pts over \$50 (or listed above)	750.00	
ne 10: Total Rece	ipts \$50 and under* (not listed above)	50.00	
	RECEIPTS IN THE PERIOD	800.00	Enter on page 1, line 2

^{*} If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
		1		
		Line 12: Total Expenditure	es over \$50 (or listed above)	
		Line 13: Total Expenditures \$50 and under* (not listed above)		
	Enter on page 1, line 4	Line 14: TOTAL EXPEN	DITURES IN THE PERIOD	

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

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SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
		Line 12: Expenditures over \$50 (or listed above)		
		Line 13: Expenditures \$50 and under* (not listed above)		
	Enter on page 1, line 4	→ Line 14: TOTAL EXPEN	NDITURES IN THE PERIOD	

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
		Line 15: In-Kind Contributions	s over \$50 (or listed above)	
		Line 16: In-Kind Contributions	\$50 & under (not listed above)	
	Enter on page 1, line $6 \rightarrow$	Line 17: TOTAL IN-KIND C	ONTRIBUTIONS	

^{*} If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

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SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
9/14/21	Louis P.	Tauton, Mf	Donated Funds Conte. Account	3,500:0
				4/